

Docket No.: 320185.00109
Customer No. 27160



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of

Leland SHAPIRO

Serial No. 09/518,076

Filed: March 3, 2000

Group Art Unit: 1653

Examiner: Unknown

For: INHIBITORS OF SERINE PROTEASE ACTIVITY, METHODS AND COMPOSITIONS
FOR TREATMENT OF HERPES VIRUSES

REQUEST FOR CORRECTED FILING RECEIPT

Commissioner for Patents
Washington, D.C. 20231

Dear Sir:

Applicant's attorneys have received an official Filing Receipt in the above-identified application in which the domestic priority data was omitted. The priority data is indicated on the attached copy of the Filing Receipt in RED ink and highlighted.

Issuance of a Corrected Filing Receipt, corrected as shown above, is accordingly respectfully requested.

If there are any fees necessary to enter this request, the Commissioner is authorized to charge the fee to our Deposit Account No. 50-1710.

Respectfully submitted,

Gilberto M. Villacorta, PH.D.
Registration No. 34,038

Gianna Julian Arnold
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Patent Administrator
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Date: August 1, 2002

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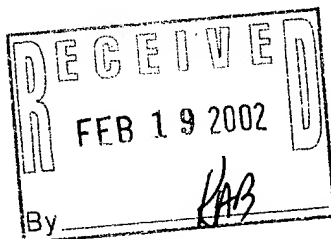


UNITED STATES PATENT AND TRADEMARK OFFICE

COMMISSIONER FOR PATENTS
UNITED STATES PATENT AND TRADEMARK OFFICE
WASHINGTON, D.C. 20231
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APPLICATION NUMBER	FILING DATE	GRP ART UNIT	FIL FEE REC'D	ATTY. DOCKET NO	DRAWINGS	TOT CLAIMS	IND CLAIMS
09/518,076	03/03/2000	1653	971	114232.109	2	39	13

27160
PATENT ADMINISTRATOR
KATTEN MUCHIN ZAVIS
SUITE 1600
525 WEST MONROE STREET
CHICAGO, IL 60661



CONFIRMATION NO. 5437
CORRECTED FILING RECEIPT



OC000000007451115

Date Mailed: 02/08/2002

Receipt is acknowledged of this nonprovisional Patent Application. It will be considered in its order and you will be notified as to the results of the examination. Be sure to provide the U.S. APPLICATION NUMBER, FILING DATE, NAME OF APPLICANT, and TITLE OF INVENTION when inquiring about this application. Fees transmitted by check or draft are subject to collection. Please verify the accuracy of the data presented on this receipt. If an error is noted on this Filing Receipt, please write to the Office of Initial Patent Examination's Customer Service Center. Please provide a copy of this Filing Receipt with the changes noted thereon. If you received a "Notice to File Missing Parts" for this application, please submit any corrections to this Filing Receipt with your reply to the Notice. When the USPTO processes the reply to the Notice, the USPTO will generate another Filing Receipt incorporating the requested corrections (if appropriate).

Applicant(s)

Leland Shapiro, Denver, CO;

Domestic Priority data as claimed by applicant

This appln claims benefit of 60/123,167 03/05/99
Foreign Applications 60/153,942 09/15/99

If Required, Foreign Filing License Granted 05/11/2000

Projected Publication Date: Not Applicable, filed prior to November 29, 2000

Non-Publication Request: No

Early Publication Request: No

** SMALL ENTITY **

Title

Inhibitors of serine protease activity, methods and compositions for treatment of herpes viruses

Preliminary Class

514

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Titl 35, United States Code, S ction 184
Titl 37, Cod f Federal Regulations, 5.11 & 5.15

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Bib Data Sheet

CONFIRMATION NO. 5437

FILE COPY

SERIAL NUMBER 09/518,076	FILING DATE 03/03/2000 RULE	CLASS 514	GROUP ART UNIT 1653	ATTORNEY DOCKET NO. 114232.109
APPLICANTS Leland Shapiro, Denver, CO;				
** CONTINUING DATA ***** THIS APPLN CLAIMS BENEFIT OF 60/123,167 03/05/1999 AND CLAIMS BENEFIT OF 60/153,942 09/15/1999				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY ** ** 05/11/2000				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature _____ Initials _____	STATE OR COUNTRY CO	SHEETS DRAWING 2	TOTAL CLAIMS 39
				INDEPENDENT CLAIMS 13
ADDRESS 27160				
TITLE Inhibitors of serine protease activity, methods and compositions for treatment of herpes viruses				
FILING FEE RECEIVED 971	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	

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